

REMARKS

Claims 1 – 17 are pending in this application with Claims 1 and 17 being amended by this response and Claims 18 - 21 being added.

Claims 1 and 14 have been amended to further recite that the processor “allocates an attribute identifying at least one of (a) newly acquired data laboratory test) results and (b) patients associated with a particular care unit”. Support for this amendment can be found on page 2, lines 20 – 34 of the present specification. Additionally, new claims 18 and 20 have been added to recite a “display generator for generating a first navigator window displaying results of a search and a second window including data representing parameters corresponding to a specific search result”. Claim 18 is dependent on independent claim 14 and claim 20 is dependent on independent claim 1. Support for new claims 18 and 20 is found in Figure 3 and the corresponding description thereof and specifically on page 7, lines 8 – 11 and line 18 – 22. New claims 19 and 21, which are dependent on claims 18 and 20, respectively, have been added and recite that the “display generator generates a display including data representing information associated with patients meeting predetermined criteria”. Support for new claims 19 and 21 is similarly found in Figure 3 and specifically on page 7, lines 26 – 30. Applicant respectfully submits that no new matter is added to the application.

Rejection of Claims 1-9, 14 and 15 under 35 USC § 102(e)

Claims 1-9, 14 and 15 are rejected under 35 USC § 102(e) as being anticipated by Jacobus et al. (U.S. Pub. 2005/0209891)

The present invention describes an apparatus and method for displaying medical information derived from a plurality of sources. The apparatus includes a communication processor for acquiring medical parameters associated with a patient including patient laboratory test results. A processor collates acquired medical parameters for storage in a

database and allocates an attribute identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit. A device searches the database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a lab test name, (b) a patient identifier, and (c) a date, for displaying in a desired order. Claims 1 and 14 include similar features.

The claimed apparatus collates the acquired medical data and searches the data based on specific criteria for display to a user in a desired order. The apparatus is designed for “acquiring medical parameters” and information regarding the patient from various sources for collation and selective display by a health care professional in a simple and easy manner (see page 2, lines 6-9). The claimed system eliminates the need for physical charts which are not adapted to readily provide the caregiver access to the information contained therein. Thus, the claimed system prevents the caregiver from having to take time to page through and find the information that is sought (see page 2, lines 3-6). The claimed apparatus resolves these problems by providing a user with a faster, more effective and user friendly means for accessing, correlating and displaying patient medical information (See page 2 of the specification).

Jacobus is concerned discloses a system wholly unlike the present claimed invention. Furthermore, Jacobus attempts to resolve a different problem than the problem resolved by the present claimed invention. Specifically, Jacobus is concerned with providing “a method for aggregating medical records, clinical observations and medical imagery into a common database” (see para. [0018]). Jacobus provides no 35 USC 112 compliant enabling disclosure of an apparatus that anticipates the present claimed invention. In fact, Jacobus provides no support for “a communication processor for acquiring medical parameters associated with a patient including patient laboratory results” as in the present claimed invention. Instead Jacobus, in Figure 3 discloses a “central archival system” that is connected via an intranet to a plurality of medical instruments that allows access to patient records from a plurality of locales. This is not the function performed by claimed system. Jacobus does not acquire “medical parameters...including patient laboratory results”. The only data acquired by the

Jacobus system is from medical devices or “instrumentation which measures medical parameters” (see Figure 3 and para. [0018]). Additional patient medical data, of which Jacobus makes no specific mention, is able to be **received** by the central system from either the patient or a patient physician.(see para. [0052] – [0059]. Thus, Jacobus relies on an entirely different data source and neither discloses nor suggests “acquiring medical parameters associated with a patient **including patient laboratory results**” as in the present claimed invention.

Additionally, Jacobus neither discloses nor suggests “a processor for collating acquired medical parameters for storage in a database” as in the present claimed invention. Specifically, “[T]he collation processor 2504 operates...to collate and prioritize parameters for display to the user.” (See page 9 of the specification). As Jacobus includes no processor as claimed in independent claims 1 and 14 of the present invention, it is respectfully submitted that Jacobus cannot solve the problem which the present claimed invention solves. Specifically, Jacobus does not provide a user friendly means for accessing, collating and displaying patient medical information, specifically “patient laboratory test results” as in the present claimed invention.

Jacobus also neither discloses nor suggests “a processor for ... allocating an attribute identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as claimed in claims 1 and 14 of the present invention. Rather, the central storage system of Jacobus merely provides a central repository that stores patient medical data in order to provide a medical history to either the patient or a physician in any location. The Jacobus system provides no specific enabling disclosure regarding “collating medical parameters” and “allocating an attribute” to the parameters to identify “at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as in the present claimed invention. Rather, Jacobus provides that data is to be tracked according to date, time, method of physician notification as well date, time and method of receipt confirmation by the physician (see para. [0264]). This is NOT equivalent to “allocating

an attribute identifying...newly acquired laboratory test results and...patients associated with a particular care unit” as in the present claimed invention.

Furthermore, while Jacobus provides a central database that includes a search function, there is no 35 USC 112 compliant enabling disclosure detailing the operation of this feature. In fact, Jacobus implies a general search function able to search the database for patient records. However, this not equivalent to the “device for searching said database” as claimed in the present invention. Jacobus neither discloses nor suggests a search device “to find specific laboratory test results **based on** one or more of (a) text string identifying a portion of a lab test name, (b) a patient identifier, and (c) a date” as in the present claimed invention. Jacobus is further not concerned with displaying the “specific laboratory test results” in a “desired order” as in the present claimed invention.

Therefore, as Jacobus provides no 35 USC 112 compliant enabling disclosure of each feature of claims 1 and 14, it is respectfully submitted that Jacobus does not anticipate the present invention as claimed in claims 1 and 14. Consequently, it is respectfully requested that the rejection of claims 1 and 14 under 35 USC 102(e) be withdrawn.

Claims 2, 5, 6, 8 and 9 are dependent on independent claim 1 and are considered patentable for the reasons presented above with respect to claims 1 and 14. Claim 15 is dependent on independent claim 14 and is considered patentable for the reasons presented above with respect to claims 1 and 14.

Applicant respectfully disagrees with the statement on page 3 of the Rejection regarding claims 3 and 4. The Rejection cites Figures 2, 10, 12 and 13 as anticipating the features claimed in claims 3 and 4. However, contrary to the Rejection, Applicant respectfully submits that there is no 35 USC 112 compliant enabling disclosure of the features claimed therein. Specifically, as discussed above with respect to claims 1 and 14, Jacobus neither discloses nor suggests “acquiring...patient laboratory results” as in the present claimed. Furthermore, Jacobus neither discloses nor suggests “a processor for

collating acquired medical parameters...and allocating an attribute identifying” specific ones of the acquired parameters as in the present claimed invention. Jacobus does not provide any guidance regarding patient data beyond storing the data for access by a physician and/or patient. In fact, the Figures cited in the rejection define access to data and not “order[ing] said acquired **patient laboratory results** by criteria” as claimed in claim 3 of the present invention. Similarly, as Jacobus provides no enabling disclosure regarding the operation of the disclosed search function. Jacobus neither discloses nor suggests “searching based on additional criteria including at least one of (a) a patient name, (b) caregiver identifier, (c) text identifying a diagnosis, and (d) text identifying a procedure” as in claim 4 of the present invention. Therefore, as each feature of claims 3 and 4 are neither disclosed nor suggested by Jacobus, Jacobus does not anticipate the present invention as claimed in claims 3 and 4. Consequently, it is respectfully requested that the rejection of claims 3 and 4 under 35 USC 102(e) be withdrawn.

The Rejection on page 4 states that Jacobus in Figure 15 and paragraphs [0044], [0050], [0052], [0055] and [0069]-[0315] disclose the features of claim 7 of the present invention. Applicant respectfully disagrees and submits that the Rejection fundamentally miss-reads and miss-interprets the system disclosed by Jacobus. Jacobus provides no 35 USC 112 compliant enabling disclosure that would anticipate a system that “acquires and displays other information **together with said laboratory test results in a composite display window**” as is performed by the present claimed invention. Jacobus states that the information is viewable in a window (see Figure 15) and that the system stores data of the type specified in paragraphs [0069] – [0315]. However, there is no disclosure by Jacobus regarding how the data is accessed and/or displayed. Moreover, there is no mention of specific types of data (“other information” and “said laboratory test results”) that is to be displayed together “**in a composite display window**” as in the present claimed invention. In fact, nowhere in paragraphs [0069] – [0315] is there mention of “laboratory test results” being stored or made accessible by the Jacobus system. Therefore, it is respectfully submitted that Jacobus does not anticipate the present invention as claimed in claim 7.

Consequently, it is respectfully requested that the rejection of claim 7 under 35 USC 102(e) be withdrawn.

In view of the above remarks and amendments to the claims, it is respectfully submitted that Jacobus provides no 35 USC 112 compliant enabling disclosure that anticipates the present invention as claimed in claims 1 and 14. As claims 2 – 9 are dependent on independent claim 1 and claim 15 is dependent on independent claim 14, it is respectfully submitted that claims 2 – 9 and 15 are similarly not anticipated by Jacobus. It is thus further respectfully submitted that this rejection is satisfied and should be withdrawn.

Rejection of Claims 10 – 13, 16 and 17 under 35 USC § 103(a)

Claims 10 – 13, 16 and 17 are rejected under 35 USC § 103(a) as being unpatentable over Jacobus et al. (U.S. Pub. 2005/0209891) in view of Cairnes (U.S. 6,139,494).

Claims 10 – 13 are considered patentable in view of their dependence on independent claim 1 and claims 16 and 17 are considered patentable in view of their dependence on independent claim 14. Thus, the arguments presented above with respect to claims 1 and 14 are applicable to claims 10 – 13, 16 and 17. Claims 10 – 13, 16 and 17 are also considered patentable for the reasons discussed below.

Cairnes discloses a medical diagnosis system that provides outpatient healthcare delivery and information to users. Symptom data is received and analyzed according to case management rules. Cairnes further generates patient information and develops a therapeutic program that is selectively updateable. This is wholly unlike and unrelated to the system claimed in the present invention.

Similarly to Jacobus, Cairnes neither discloses nor suggests “a processor for collating acquired medical parameters for storage in a database and allocating an attribute identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as in the present claimed invention. The Rejection on page 6 erroneously cites Figures 6 – 8 and column 8, line 56 – column 9 , line 8 of Cairnes as providing disclosure that renders the present invention obvious. Specifically, the Rejection identifies the use of reminders and alerts for a daily triaged clinical agenda as the obvious pre-requisite for “allocating an attribute” that would determine the status of information. Applicant respectfully submits that the Rejection fundamentally misunderstands and miss-interprets the cited section of Cairnes. A system for “collating...and allocating an attribute” identifying data is not contemplated by Cairnes in the cited section (or elsewhere). Rather, column 8, line 56 – column 9, line 8 of Cairnes is a diagnostic tool that is able to prioritize work that must be accomplished. Cairnes clearly states that a “medical alert is generated when [a personal health advisor] processes patient data and identifies that at least one sign and symptom of a patient exceeds predefined medical parameters”. The generated medical alert works to prioritize responses to patient healthcare needs. Cairnes is a diagnosing system that ensures the patient’s health is within appropriate ranges. Data must be processed and analyzed to generate this medical alert. There would be no need to “allocate an attribute” to any data in Cairnes because the data is already analyzed and used to make a determination that “a sign or symptom” is out of acceptable ranges.

Contrary to Cairnes, the present claimed invention is “an apparatus for **displaying** medical information derived from a plurality sources”. Applicant respectfully submits that it would NOT be obvious to include “an attribute identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as in the present claimed invention. The allocated attributes are able to be used by the system to assist in prioritizing information to be **displayed** to a healthcare professional. Cairnes is concerned with remote healthcare diagnosis and treatment.

Furthermore, column 10, line 65 – column 11, line 2 of Cairnes discusses “Lab Results”. No where in the above section does Cairnes disclose or suggest “**acquiring** medical parameters associated with a patient including patient laboratory results” as in the present claimed invention. Cairnes also neither discloses nor suggests “a device for searching said database...to find **specific laboratory test results**” based on specific search criteria as in the present claimed invention. Applicant respectfully submits that features as discussed above and claimed herein are unnecessary in a system such as the one disclosed by Cairnes because the Cairnes system is only concerned with diagnosis and treatment of patients. This is contrary to the present claimed system which provides a user with a faster, more effective and user friendly means for accessing, correlating and displaying patient medical information (See page 2 of the specification).

With respect to claim 12, Applicant respectfully submits that it would not be obvious to “allocate an attribute for identifying test results that are outside a predetermined range level” as in the present invention. In fact, Cairnes precisely describes action to be taken if data is found to be outside an acceptable range. Specifically, a medical alert is generated, entered into a “to do” list, compared with other alerts and prioritized for action thereupon. This ensures that patients will be treated as needed and that they receive the best healthcare for their identified condition. Cairnes requires action to be prioritized and taken and thus teaches against a system including the claimed feature which “allocates an attribute for identifying laboratory test results that are outside a predetermined range level”. The present claimed system, unlike Cairnes, “allocates an attribute” to assist in search and display of the “acquired” medical parameter data that includes “patient laboratory results” to healthcare professionals.

Applicant respectfully submits that there is no motivation to combine the system of Jacobus with the system of Cairnes as they are intended to accomplish entirely different and unrelated goals. The Jacobus system is merely a central storage system for patient medical records that provides access from any location whereas the Cairnes system is a diagnosis system that is charged with diagnosing and treating an outpatient population.

The systems have completely different unrelated designs and while the Cairnes system uses stored medical data to make a diagnosis, the primary concern is obtaining medical information from medical devices and evaluating the data to make a diagnosis and produce a treatment plan. Jacobus has no need for an evaluation service as it is designed to be a repository that is accessible and updateable. Therefore, there is no common problem recognition between the system of Jacobus and the system of Cairnes.

Furthermore, even if there were a reason to combine the Jacobus system with the Cairnes system, the result would not produce the system of the present claimed invention. Instead, the combination would result in central repository for medical data that includes an evaluation function used for treating an outpatient population by providing diagnosis and therapeutic programs based on evaluation of sensed medical data. The combination of Jacobus with Cairnes does not result in a system for “displaying medical information” that “acquir[es] medicate parameters associated with a patient including patient laboratory test results” and “for collating acquired medical parameters for storage in a database and allocating an attribute identifying at least one of (a) newly acquired laboratory test results and (b) patient associated with a particular care unit” as in the present claimed invention. Neither Jacobus nor Cairnes discuss “allocating an attribute identifying” specific data and “searching said database...to find specific laboratory test results **based on**” certain criteria.

In view of the above remarks and amendments to the claims, it is respectfully submitted that Jacobus alone or in combination with Cairnes provides no 35 USC 112 compliant enabling disclosure that make the present invention as claimed in claims 1 and 14 unpatentable. As claims 10 – 13 are dependent on independent claim 1 and claims 16 – 17 are dependent on independent claim 14, it is respectfully submitted that claims 10 – 13, 16 and 17 are similarly not made unpatentable by Jacobus and/or Cairnes. It is thus further respectfully submitted that this rejection is satisfied and should be withdrawn.

With respect to new claims 18 – 21, Applicant respectfully submits that Jacobus and Cairnes (alone or in combination) provide no 35 USC 112 compliant enabling

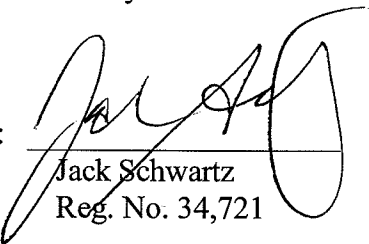
Application No. 09/992,991 Attorney Docket No. 2000P09056US01
disclosure that either anticipates or makes unpatentable the claimed features. Specifically, new claims 18 – 21 are concerned with generating and displaying windows on a display for “displaying results of a search” and “data representing parameters corresponding to a specific search result” and further “including data representing information associated with patients meeting predetermined criteria”. These features are neither disclosed nor suggested by Jacobus alone or with Cairnes. Therefore, Applicant respectfully submits that new claims 18 – 21 are patentable.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

A fee of fifty dollars (\$50.00) under 37 CFR 1.16(i) is included with this response for one additional in excess of the twenty allowed and not previously paid for. No additional fee is believed due with this response. However, if a fee is due, please charge the fee to Deposit Account 50-2828.

Respectfully submitted,
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